STATE OF FLORIDA

County of _____

Sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization, this _____ day of _____20____ by _____ whose identification was relied upon by a sworn written statement of two credible witnesses:

_____ who provided _____ as identification and

_____ who provided _____ as identification.

(SEAL)

_____
notary public signature

_____
notary public printed name

Although the information below is not required by law, the identification of the document being referenced by this acknowledgment could be valuable to persons relying on the document and could prevent fraudulent removal and reattachment of an unrelated document.

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Capacity(ies) Claimed by Signer

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[ ] Corporate Officer / Partner – Title(s): _____
[ ] Attorney in Fact
[ ] Trustee [ ] Co-Trustee
[ ] Guardian or Conservator
[ ] Other: _____